



STATE OF MARYLAND

**DHMH**

**Department of Health and Mental Hygiene**

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor

Joshua M. Sharfstein, M.D., Secretary

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**MARYLAND BOARD OF PHARMACY**

4201 Patterson Avenue • Baltimore, Maryland 21215-2299

Michael N. Souranis, Board President - LaVerne G. Naesea, Executive Director

**MEMORANDUM**

**DATE:** April 15, 2012

**TO:** Pharmacy Technician and Student Pharmacy Technician Applicants

**FROM:** Latoya Waddell, Manager – Licensing Unit

**RE:** **CRIMINAL BACKGROUND CHECKS – NEW PROCESS (effective 4/15/2012)**

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Thank you for your interest in becoming a registered Pharmacy Technician or Pharmacy Technician Student in Maryland. The Maryland Criminal Justice Information System (CJIS) - Central Repository and the FBI have implemented changes to the process of conducting criminal background checks fingerprinting, effective after **Sunday, April 15, 2012**. After April 15<sup>th</sup>, ink fingerprint cards will no longer be accepted by CJIS or the FBI and fingerprints must be electronically or digitally captured. The cost for the State background check is \$18.00. Digital fingerprinting is an additional \$20 if done at a State operated location (other authorized locations may charge a fee that is greater or less than \$20.00).

All fingerprint submissions must be electronically or digitally captured at approved electronic fingerprint locations on the enclosed list. For the most up-to-date listing go on-line to:

<http://www.dpscs.maryland.gov/publicservs/fingerprint.shtml>.

A Livescan Pre-Registration Application is attached and may be completed before you arrive at the fingerprint location. The authorization number for the Maryland Board of Pharmacy is **0600062013** and *must* be included on the application under *Agency Authorization #*. Please also check the *Government Licensing Certification* box located in the Request Type section of the pre-application. Applicants are encouraged to submit the pre-application directly to CJIS.

For more information please contact the location where you intend to be fingerprinted using the enclosed list.

# Fingerprinting Services / Fingerprinting Locations

## State Operated Fingerprinting Services

**Location:** 6776 Reisterstown Road  
(West side of Reisterstown Road Plaza Mall)  
Suite 102 (first floor)  
Baltimore, MD 21215  
For directions, go to <http://www.mapquest.com>

**Phone:** 410-764-4501  
1-888-795-0011 (toll free)

**Hours of Operation** Monday, Tuesday, Wednesday, Friday  
8:30am- 5:00pm

Thursday  
8:30am – 6:30pm

1st and 3rd Saturdays of each month  
8:30am – 4:30pm

**Closed on designated State holidays**

### The following locations are available by appointment only:

Motor Vehicle Administration - Bel Air  
501 West MacPhail Road  
Bel Air, MD 21014

Motor Vehicle Administration - Frederick  
1601 Bowman's Farm Rd.  
Frederick, MD 21701

Motor Vehicle Administration - Waldorf  
St. Charles Business Park  
11 Industrial Park Drive  
Waldorf, MD 20602

Motor Vehicle Administration - Salisbury  
251 Tilghman Rd  
Salisbury, MD 21801

Motor Vehicle Administration - Glen Burnie  
6601 Ritchie Hwy, N.E.  
Glen Burnie, MD 21062

Call for an appointment: 410-764-4501 or 1-888-795-0011 (toll free)

Fees are required to process each criminal background record check request.

**All fees must be paid by credit card, check or money order in United States currency. The Central Repository cannot accept cash.**

Full background [state and FBI] for authorized agencies only	\$34.50
child care volunteers	\$33.00
State background check only	\$18.00
with Gold Seal	\$19.00
Criminal Justice	
full background	No fee
state only	No fee
Attorney/Client civil	\$18.00
Attorney/Client pending criminal case	No fee

The fingerprinting fee at the CJIS Central Repository is \$20.00 with no card limit. You may choose to have your fingerprints taken at another agency. Make sure to check with that agency for their fingerprinting fees as fees may vary.



**STATE OF MARYLAND**  
**DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES**  
**CRIMINAL JUSTICE INFORMATION SYSTEMS – CENTRAL REPOSITORY**

**LIVESCAN PRE-REGISTRATION APPLICATION**

**APPLICANT INFORMATION** (PLEASE TYPE OR PRINT CLEARLY)

Name: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ SSN: \_\_\_\_\_ Gender: ☐ Male ☐ Female (Please check)  
Height: ft. \_\_\_\_\_ inches \_\_\_\_\_ Weight: \_\_\_\_\_ lbs. \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_  
Race: ☐ Black ☐ White ☐ Asian/Pacific Islander ☐ Native American ☐ Other (Please check)  
Place of Birth: \_\_\_\_\_ Citizenship: \_\_\_\_\_  
Current address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

**AGENCY INFORMATION**

Agency Authorization #: \_\_\_\_\_  
ORI # (If required): \_\_\_\_\_ Reason fingerprinted? \_\_\_\_\_  
Position Applied for: \_\_\_\_\_  
Request Type: (Choose one ONLY)  

<input type="checkbox"/> Adult Dependent Care	<input type="checkbox"/> Government Licensing or Certification
<input type="checkbox"/> Attorney/Client	<input type="checkbox"/> Immigration/VISA
<input type="checkbox"/> Child care	<input type="checkbox"/> Individual Challenge
<input type="checkbox"/> Criminal Justice	<input type="checkbox"/> Individual Review
<input type="checkbox"/> Gold Seal/ Adoption	<input type="checkbox"/> MSP Licensing
<input type="checkbox"/> Gold Seal/Letter/VISA	<input type="checkbox"/> Private Party Petition
<input type="checkbox"/> Government Employment	<input type="checkbox"/> Public Housing

**Mail Response to:**

(Mailing option only available for Visa Gold Seal and/or Individual Review)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip code: \_\_\_\_\_